

In re Appln. of:
Serial No.:
Filed:
For:

Joseph Lee BOYARSKI
10/761,506
January 21, 2004
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MAKING THE SAME

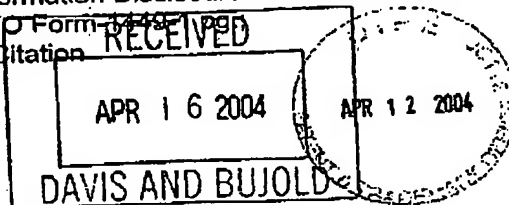
Group Art Unit:
Examiner:
Docket:

THOLAM P225US

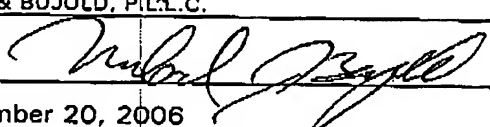
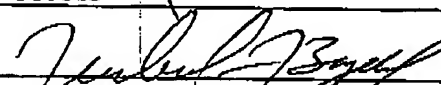
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/761,506
	Filing Date	January 21, 2004
	First Named Inventor	Joseph Lee BOYARSKI
	Group Art Unit	3727
	Examiner Name	Sue A. WEAVER Fax: (571) 273-8300
Total No. of Pages in this Submission: 9	Attorney Docket Number	THOLAM P225US
ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (in Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Further copy of JP 2002 159315 COPY of Returned Postcard
REMARKS		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual Name	Michael J. BUJOLD DAVIS & BUJOLD, PLLC.	
Signature		
Date	September 20, 2006	
CERTIFICATE OF TRANSMISSION		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO on September 20, 2006		
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